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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	09/782,936
		Filing Date	February 14, 2001
		First Named Inventor	Vivian E. Mack Strong, et al.
		Group Art Unit	1614
		Examiner Name	Shep K. Rose
Total Number of Pages in This Submission	4	Attorney Docket Number	19603/4071 (CRF D-2598A)

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response to Election of Species Requirement <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> A copy of the Notice to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.

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OCT 30 2003

TECH CENTER 1600/2900

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Edwin V. Merkel Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1128 Fax: (585) 263-1600
Signature	 Registration No. 40,087
Date	October 21, 2003

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
I hereby certify that this correspondence is being:	
<input checked="" type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop _____, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
<input type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____	
10/21/03 Date	 Signature Jane C. Wirszyła Typed or printed name

<div style="display: flex; justify-content: space-between;"> <div style="text-align: left;"> <b>FEE TRANSMITTAL</b>  <b>OCT 23 2003 FOR FY 2003</b>  <i>Patent fees are subject to annual revision.</i>  <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27         </div> <div style="text-align: right;"> <b>RECEIVED</b>  <b>OCT 30 2003</b>  <b>TECH CENTER 1000/2900</b> </div> </div>		<i>Complete if Known</i>	
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Art Unit	1614		
TOTAL AMOUNT OF PAYMENT (\$)		55	
Attorney Docket No.		19603/4071 (CRF D-2598A)	

<b>METHOD OF PAYMENT</b> (check all that apply)				<b>FEE CALCULATION</b> (continued)																																																																																																																																																																																																			
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None				<b>3. ADDITIONAL FEES</b>  <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2"></th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td>55.00</td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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<b>CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]</b> I hereby certify that this correspondence is being: <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> <input checked="" type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop _____, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450         </div> <div> <input type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____         </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>           10/21/03            Date         </div> <div>             Signature            Jane C. Wirszyła            Typed or printed name         </div> </div>																																																																																																																																																																																																							

<b>SUBMITTED BY</b>				<i>Complete (if applicable)</i>	
Name (Print/Type)	Edwin V. Merkel	Registration No.	40,087	Telephone	(585) 263-1128
Signature		(Attorney/Agent)		Date	October 21, 2003

SEND TO: Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450



PATENT  
Docket No.: 19603/4071 (CRF D-2598A)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Vivian E. Mack Strong, et al. )  
Serial No. : 09/782,936 )  
Cnfrm. No. : 1665 )  
Filed : February 14, 2001 )  
For : USE OF COX-2 INHIBITORS TO TREAT )  
SEPSIS, COMPLICATIONS THEREOF, AND )  
EP RECEPTOR MODULATION )

Examiner:  
Shep K. Rose

Art Unit:  
1614

**RECEIVED**  
OCT 30 2003

TECH CENTER 1600/2900

RESPONSE TO ELECTION OF SPECIES REQUIREMENT


Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:


In response to the September 11, 2003, election of species requirement, applicants elect, with traverse, the following species. For the cyclooxygenase-2 inhibitor, applicants elect MK-0966, and, for the treatment, applicants elect treating sepsis. Claims reading on the elected species include claims 1, 15, and 24-27. However, since the entire genus of the present application can be searched and examined without undue burden on the U.S. Patent and Trademark Office, applicants submit that the election of species requirement should be withdrawn.

Respectfully submitted,

Date: October 21, 2003

  
Edwin V. Merkel  
Registration No. 40,087

NIXON PEABODY LLP  
Clinton Square, P.O. Box 31051  
Rochester, New York 14603-1051  
Telephone: (585) 263-1128  
Facsimile: (585) 263-1600

<b>Certificat of Mailing - 37 CFR 1.8(a)</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450, on the date below.	
Date	<u>10/21/03</u>  Jane C. Wirszyka